

To: Anne Tonkin, Stephen Adelstein, Mark Bodycoat, Kerry Bradbury, Richard Doherty, Samuel Goodwin, Eileen Jerga, Hannah McGlade, Con Michael, Andrew Mulcahy, Susan O' Dwyer, and Michelle Wright of the Medical board of Australia (MBA)

We write to you in response to your public document on the Medical Board of Australia website: [Public consultation on clearer regulation of medical practitioners who provide complementary and unconventional medicine and emerging treatments.](#)

We are in favour of OPTION 1 for the following reasons.

1. We believe there is a major conflict of interest in that Dr. Anne Tonkin, as Chair of the MBA and Dr. Stephen Adelstein a board member, are or have been members of the group Friends of Science in Medicine (FSM) established in 2011, a fringe organisation whose members clearly are anti-complementary medicine and anti-alternative therapies and have an agenda to remove patient choice to decide their own healthcare pathway. FSM label 'Complementary and alternative medicine as pseudoscience' ("In short, pseudoscience is "a collection of beliefs or practices mistakenly regarded as being based on scientific method") clearly exposing their lack of any scientific knowledge in relation to these therapies readily available in respected international peer-reviewed journals and textbooks.

From the 'Friends of Science in Medicine's website "Complementary and alternative medicine interventions include naturopathy, homeopathy, osteopathy, chiropractic, energy medicine, iridology, reflexology etc. They claim to be sciences, but most are based on principles incompatible with science and the laws of Nature, and are, therefore, clearly pseudosciences.

This apparent conflict of interest is very disappointing from a National Medical organisation (with an apparent lack of bias and transparency) defining medical care in Australia. It concerns us greatly.

2. Agreeing to this proposal would limit/remove the right to choose and the choice of medical care for all Australians. Medical doctors that have trained extensively in 'complementary and alternative medicines' provide an invaluable service to medical care in Australia. These highly trained Integrative Practitioners provide what can be simply defined as "Good Medicine" with evidence based treatments that are safe and effective for their patients.
3. We have a problem with the definitions of "complementary" "unconventional medicine" "emerging treatments". They are just not clear and specific enough. By putting those altogether in a general proposal, you are implying in the context of your proposal that Integrative Medicine is somehow 'fringe' medicine'.
4. You include in your proposal –

"Concerns about therapies and treatments being offered include:

Prescribing compounded products:

- ...where a commercial product is available and suitable
- ...where there is a lack of evidence to support the compounded product's use
- ... that have been manufactured in circumstances that don't meet expected quality assurance processes
- ...that have been manufactured in bulk rather than to meet an individual's needs "

There would seem to be a lack of understanding of what compounded products are and the current compounding environment in Australia. Compounding has been an integral part of healthcare in Australia and around the world for centuries. Compounding in 21st century is synonymous to its 20th century counterpart called 'Extemporaneous dispensing'. Prescriptions for extemporaneous medicines have been prescribed by all GP's in Australia for decades with a safety profile that is light years ahead of conventional prescribing. With advances in technology and our greater knowledge in formulating medicines, extemporaneous dispensing is now called simply 'Compounding' and is today much more advanced, safe and regulated than ever before.

Compounding in Australia is regulated by the Pharmacy Board of Australia and a full explanation of the regulatory requirements of pharmacists to compound quality, safe and efficacious compounded medicines is clearly defined in the [Guidelines for compounding of medicines released by the Pharmacy board of Australia in March 2015](#) and [Standard 5 of the Pharmaceutical Society of Australia's, Professional Practice Standards 2017](#).

“Under section 41 of the National Law, these guidelines can be used in disciplinary proceedings under the National Law or law of a co-regulatory jurisdiction as evidence of what constitutes appropriate professional conduct or practice for pharmacists.”

Your concerns are unfortunately ill founded and lack any evidence of harm to patients as part of a therapeutic treatment prescribed by an Integrative Practitioner. Compounding pharmacists have a solid professional and cooperative relationship with integrative practitioners that work together to provide the best possible treatment and outcomes available to our patients.

In response to your concerns individually...

- *... where a commercial product is available and suitable.*

Some commercial product contain excipients such as colourings, preservative, flavouring, gluten, soy etc. that have adverse effect on some chemically sensitive patients such as children on the autism spectrum and patients with chronic medical issues such as coeliac disease for example. A compounding pharmacist can make a “copy” for this commercially available product without the excipients so the patient can avail of that treatment when previously this was not an option.

- *...where there is a lack of evidence to support the compounded product's use.*

As per the Pharmacy Boards guidelines for compounding of medicines 2015 a pharmacist may not compound any medicine without appropriate evidence of a precedent of use and a risk assessment of the patient by the pharmacist to ensure the safety and appropriateness of the compound prescribed.

- *...that have been manufactured in circumstances that don't meet expected quality assurance processes*

Pharmacists do not manufacture. One must have a Good Manufacturing Practice (GMP) licence issued by the Therapeutics Goods and administration (TGA) to do so. A pharmacist is exempt from the need for a GMP licence by TGA legislation to compound a medicine but only if it is made for an

individual patient and for a therapeutic use for that patient. As per the Pharmacy Board's Guidelines for compounding of medicines 2015 a quality management system and appropriate quality controls must be in place in all Compounding Pharmacies to ensure all compounds are made to the highest quality standards.

- *...that have been manufactured in bulk rather than to meet an individual's needs*

It is illegal for any Pharmacist to manufacture and to manufacture in bulk any medicine as this is in violation of the Pharmacy Boards guidelines for compounding of medicines 2015 and TGA legislation.

5. Your explanations of errors with your so called 'complementary medicines, unconventional medicine and emerging treatments' with a few choice case examples, does not weigh up against the "250,000 hospital submissions annually (in Australia) as a direct result medication related problems prescribed by General Practitioners with an additional 400,000 presentations to emergency departments due to medicine misuse" (Dr. Chris Freeman, PSA National president, Australian Pharmacist June, 2019). I would imagine that more focus on policy in preventing these admissions would be a more pressing priority. Just how many admissions to hospitals are attributed to prescribing by Integrative Practitioners versus prescribing by 'regular' General Practitioners? Your evidence of harm by Integrative medicine is miniscule at best.
6. The current *Good Medical Practice: A Code of Conduct for Doctors in Australia* adequately regulates all doctors and how they practice medicine to ensure the safety of all patients in Australia. Is this not good enough?
7. And finally, it is very disappointing that you did not see the importance and need for further consultation with all stakeholders in complementary medicine (traditional medicine) and we are at a loss as to why you did not at least include the incredible integrative Practitioners, your fellow medical colleagues, all across Australia as part of this consultation process.

Yours Sincerely,

Karl Landers, Pharmacist/Proprietor Kingsway Compounding

George Dimaris, Pharmacist/Proprietor Kingsway Compounding

And on behalf of Kingsway Compounding, 40/9 Powell's rd., Brookvale, NSW 2100.